



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E271054**

INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

TRIBAL RESERVATION ☐

CASE #	13-02344
LOCAL AGENCY CODING	
TOTAL # OF UNITS	02
OBJECT STRUCK	

M	M	D	D	Y	Y	Y	Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION	09	19	2013	0813	31						

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ NON-INTERSECTION ☒

STATE ROUTE 204	BLOCK NO. <input checked="" type="checkbox"/>	8000
	MILE POST <input type="checkbox"/>	

DISTANCE	75	00	MILES	N	E	81ST AVE SE
			FEET	S	W	

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET <input checked="" type="checkbox"/>	PHONE	D: 8509105874
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LAST NAME	PINELA	FIRST NAME	VALERIE	MIDDLE INITIAL	N
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STREET NEW ADDRESS	9332 11TH ST NE
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CITY	LAKE STEVENS	ST	WA	ZIP	98258
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CDL	E	RESTRICTIONS	A	ENDORSEMENTS	
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DRIVER'S LICENSE #	P540874939120	STATE	FL	SEX	F	D.O.B.	MMDDYYYY	11	12	1993
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ON DUTY	<input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	226WZH	STATE	WA	VIN#	4A3AA46G43E122684
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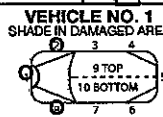
TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2003	MAKE	mits	MODEL	GAL4D	STYLE	4D	VEHICLE TOWED	YES	NO	TOWED BY	GOVT. VEHICLE	YES	NO
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REGISTERED OWNER INFO. VICTOR MUNOZ MUNOZ, LAURI MARYSVILLE WA 98270

LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	GEICO 4107-69-39-80
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VEHICLE LEGALLY STANDING	YES	NO	CITATION #	CHARGE
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET <input checked="" type="checkbox"/>	PHONE	D: 4257508751
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LAST NAME	DAHLGREN	FIRST NAME	DAWNA	MIDDLE INITIAL	M
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STREET NEW ADDRESS	10908 FOREST RD
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CITY	LAKE STEVENS	ST	WA	ZIP	982589593
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CDL		RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #	DAHLGDM372QJ	STATE	WA	SEX	F	D.O.B.	MMDDYYYY	11	11	1963
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ON DUTY	<input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	AMS9514	STATE	WA	VIN#	3FA6P0K90DR279592
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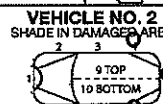
TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2013	MAKE	FORD	MODEL	FUSION	STYLE	4D	VEHICLE TOWED	YES	NO	TOWED BY	GOVT. VEHICLE	YES	NO
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REGISTERED OWNER INFO. DAWNA DAHLGREN 10908 FOREST RD LAKE STEVENS WA 98258

LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	AMERICAN COMMERCE INS ACPA000559349
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VEHICLE LEGALLY STANDING	YES	NO	CITATION #	CHARGE
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OFFICER'S NAME (PRINT)	CHAD CHRISTENSEN	BADGE OR ID #	075	AGENCY	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E271054**

CASE # **13-02344**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)											
ADDRESS & PHONE #											
SEX		D.O.B. MMDDYYYY									
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT	
HELMET USE		INJURY CLASS		NATURE OF INJURIES							
NAME (LAST, FIRST, MIDDLE INITIAL)											
ADDRESS & PHONE #											
SEX		D.O.B. MMDDYYYY									
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT	
HELMET USE		INJURY CLASS		NATURE OF INJURIES							
NAME (LAST, FIRST, MIDDLE INITIAL)											
ADDRESS & PHONE #											
SEX		D.O.B. MMDDYYYY									
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT	
HELMET USE		INJURY CLASS		NATURE OF INJURIES							

NARRATIVE

Unit 2 was travelling westbound on SR 204 just west of 81st Ave SE and was slowing for traffic. Unit 1 was also travelling westbound behind Unit 2. Driver of Unit 1 was cleaning her glasses and did not see Unit 2 slowing for traffic and rear-ended Unit 2. There were no reported injuries at the time of the investigation.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

CHAD CHRISTENSEN

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

09-19-13 09:24 AM

DATED

PLACE SIGNED

APPROVED BY

RON BROOKS 013

DATE

9/19/2013 5:45:53 PM

BADGE OR ID # **075**

ORI # **WA0311900**

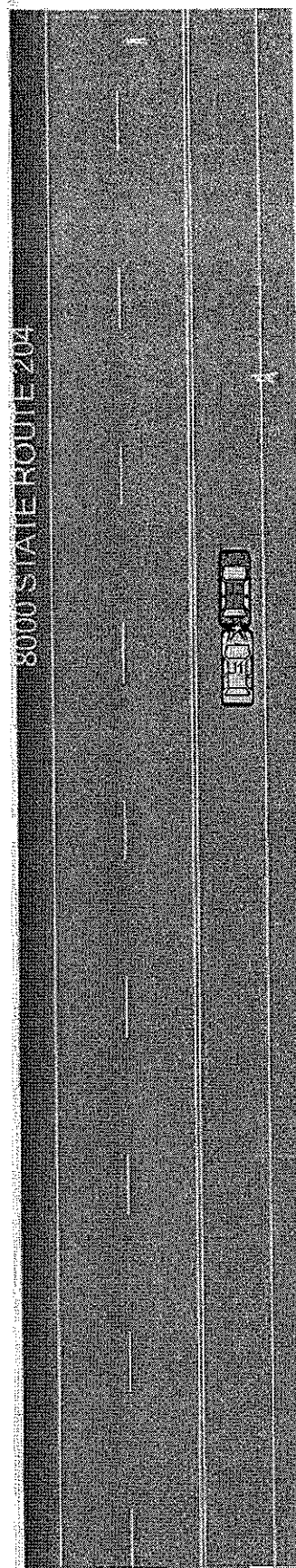
TIME POLICE DISPATCHED **8:14 AM**

TIME POLICE ARRIVED **8:20 AM**

REPORT NO. E271054

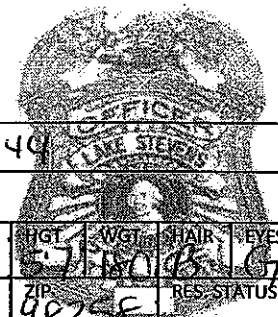
CASE # 13-02344

DATE AND TIME OF COLLISION 09/19/13 08:13



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT



CASE NUMBER 13-02340

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Dahlgren, Dawn	RACE W	ETH	SEX F	DOB 11-11-63	AGE 49	HGT 5-7	WGT 140	HAIR B	EYES G
STREET ADDRESS 10908 Forest Rd		CITY LK Stevens			STATE WA	ZIP 98258	RES STATUS			
HOME PHONE 425-238-3566		CELL PHONE 425-70-8751			PLACE OF EMPLOYMENT Boeing					
WORK PHONE 425-238-0521		EMAIL ADDRESS idawanna@msn.com								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was Driving on H204 at about 8am in slow traffic. The car in front of me hit the brakes so I hit my brakes to slow down and the car behind me ran into me. She told me she was on her way to school and she had taken her glasses off to clean them when traffic came to a stop.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

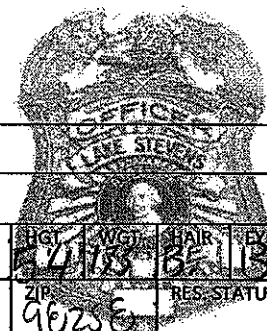
SIGNATURE: Dawn M. Dahlgren	DATE SIGNED 9/19/13	LOCATION SIGNED Lake Stevens, WA
OFFICER/NUMBER: C. Christ #75	DATE SIGNED 9/19/13	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

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LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT



CASE NUMBER

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Pinela Valerie Nichole	RACE	ETH	SEX F	DOB 11/12/93	AGE 19	HGT 5'4"	WGT 115	HAIR BLK	EYES BLU
STREET ADDRESS 9332 11th st		CITY Lake Stevens		STATE WA		ZIP 98256		RES. STATUS		
HOME PHONE		CELL PHONE 830 910 5874		PLACE OF EMPLOYMENT Golden Corral						
WORK PHONE		EMAIL ADDRESS								

I, Valerie Pinela, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

Driving down the thussel, my glasses had spots and were bugging me, so I took them off. As soon as I did that everything came to a complete stop. I had my glasses in one hand when everything came to a halt. Then I hit the rear end. Tried to see it my didn't have a chance to.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>Valerie Pinela</u>	DATE SIGNED	LOCATION SIGNED
OFFICER/NUMBER: <u>P. Chute #75</u>	DATE SIGNED 9/19/13	LOCATION SIGNED

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